Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Katrina First name L.	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Trice Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Katrina L. Collins	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7055	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	3488 Woodridge Road	If Debtor 2 lives at a different address:
		Cleveland Hts., OH 44121 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cuyahoga	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Katrina L. Trice				Case number (if known)
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	ase	
7.	The chapter of the Bankruptcy Code you are			orief description of each, see <i>Notice Requi</i> go to the top of page 1 and check the app	ired by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy propriate box.
	choosing to file under	■ Chap	ter 7		
		☐ Chap	ter 11		
		☐ Chap	ter 12		
		☐ Chap	ter 13		
8.	How you will pay the fee	ab ord	out how yo	ou may pay. Typically, if you are paying the attorney is submitting your payment on your	se check with the clerk's office in your local court for more details a fee yourself, you may pay with cash, cashier's check, or money our behalf, your attorney may pay with a credit card or check with
					nis option, sign and attach the Application for Individuals to Pay
		☐ Ire	equest tha		s option only if you are filing for Chapter 7. By law, a judge may, nly if your income is less than 150% of the official poverty line
		tha	t applies t	o your family size and you are unable to pa	ay the fee in installments). If you choose this option, you must fill aived (Official Form 103B) and file it with your petition.
l	Have you filed for bankruptcy within the	■ No.			
	last 8 years?	☐ Yes.			
			District	When	Case number
			District	When	Case number
			District	When	Case number
10.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
			Debtor		Relationship to you
			District	When	Case number, if known
			Debtor		Relationship to you
			District	When	Case number, if known
11.	Do you rent your	■ No.	Go to	ine 12.	
	residence?	☐ Yes.	Has yo	our landlord obtained an eviction judgment	against you?
				No. Go to line 12.	
				Yes. Fill out <i>Initial Statement About an E</i> this bankruptcy petition.	viction Judgment Against You (Form 101A) and file it as part of

Deb	tor 1 Katrina L. Trice				Case number (if known)
Pari	3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	rietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.	
		☐ Yes.	Name	and location of bu	pusiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	State & ZIP Code
	it to this petition.		Check	the appropriate be	box to describe your business:
				Health Care Busi	siness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	eal Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as	s defined in 11 U.S.C. § 101(53A))
				Commodity Broke	ker (as defined in 11 U.S.C. § 101(6))
				None of the abov	ove
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	s. If you in	dicate that you are ow statement, and	the court must know whether you are a small business debtor so that it can set appropriate re a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	ot filing under Cha	napter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	•	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	ling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ari	4: Report if You Own or	· Have Any	/ Hazardo	us Property or Ar	Any Property That Needs Immediate Attention
4.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs			liate attention is	
	immediate attention?		needed,	why is it needed?	?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Katrina L. Trice

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Katrina L. Trice			Case number	(if known)
Par	t 6: Answer These Questi	ons for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ness debts? Business debts are debts ment or through the operation of the busi	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe	e that are not consumer debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do expenses are paid that funds w	you estimate that after any exempt prop ill be available to distribute to unsecured	erty is excluded and administrative creditors?
	administrative expenses		■ No		
	are paid that funds will be available for		□ Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5 001-10,000	5 0,001-100,000
		☐ 100-1		□ 10,001-25,000	☐ More than100,000
		200-9	99		
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— \$500,	001 - \$1 Hillion		
20.	How much do you estimate your liabilities	□ \$0 - \$		☐ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion
	to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	☐ \$100,000,001 - \$100 million	☐ More than \$50 billion
	<u></u>	— \$000,			
Par	Sign Below				
For	you	I have ex	amined this petition, and I declar	re under penalty of perjury that the inform	nation provided is true and correct.
				am aware that I may proceed, if eligible, ef available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.
				pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this
		I request	relief in accordance with the cha	apter of title 11, United States Code, spe	cified in this petition.
		bankrupt 1519, and	cy case can result in fines up to S	oncealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	
		Katrina	L. Trice e of Debtor 1	Signature of Debtor	2
		Executed	on February 1, 2019	Executed on	
			MM / DD / YYYY	MM	/ DD / YYYY

Debtor 1	Katrina L. Trice	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Martin Baker	Date	February 1, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Martin Baker (0026409)		
Printed name		
Baker, Baker & Baker LLC		
Firm name		
55 Public Square		
Suite 1330		
Cleveland, OH 44113		
Number, Street, City, State & ZIP Code		
Contact phone 216-771-3966	Email address	sbakerlaw@sbcglobal.net
(0026409) OH		
Bar number & State		

Fill	in this inforn	nation to identify yo	ur case:			
Deb	otor 1	Katrina L. Trice	<u>}</u>			
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Bar	nkruptcy Court for the	NORTHERN DISTRICT	OF OHIO		
Cas	se number					
(if kn	lown)				_	k if this is an ded filing
						3
Of	ficial Fo	rm 106Sum				
Su	mmary o	f Your Assets	and Liabilities an	d Certain Statistical Information		12/15
info	rmation. Fill o	out all of your sched	dules first; then complete th	e are filing together, both are equally responsible ne information on this form. If you are filing amen k the box at the top of this page.		
Par		arize Your Assets	, a s			
					Your a	seate
						of what you own
1.	Schedule A	/B: Property (Officia e 55, Total real estate	Form 106A/B) e, from Schedule A/B		\$	110,000.00
	1b. Copy line	e 62, Total personal _l	property, from Schedule A/B.		\$	5,875.00
	1c. Copy line	e 63, Total of all prop	erty on Schedule A/B		\$	115,875.00
Par	t 2: Summa	arize Your Liabilitie	S			
						abilities it you owe
2.			Claims Secured by Property Dlumn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D.</i>	\$	96,000.00
3.			ve Unsecured Claims (Officia art 1 (priority unsecured claim	l Form 106E/F) ns) from line 6e of S <i>chedule E/F</i>	\$	0.00
	3b. Copy the	e total claims from P	art 2 (nonpriority unsecured o	elaims) from line 6j of Schedule E/F	. \$	129,746.48
				Vaundadal liabilidia		005.740.40
				Your total liabilities	-	225,746.48
Par	t 3: Summa	arize Your Income a	and Expenses			
4.		Your Income (Official ombined monthly inc		÷ I	. \$	3,397.00
5.		Your Expenses (Officiently expenses from			\$	3,415.00

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,888.00

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	87,553.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	87,553.00

Ophtor 1	nation to labiting	your case and th	nis filin	g:			
Debtor 1	Katrina L. Tr						
Debtor 2	First Name	Middle	Name	Last Name			
Spouse, if filing)	First Name	Middle	Name	Last Name			
Inited States Bar	nkruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO			
Case number							Check if this is a
						_	amended filing
Official Fo	rm 106A/B	<u> </u>					
chedule	e A/B: Pr	operty					12/15
each category, se	parately list and de	scribe items. List a	n asset o	only once. If an asset fits in more than one	category, list t	he asset in the c	ategory where you th
Yes. Where is	s the property?						
3488 Wood	dridge Road if available, or other des	scription	What	t is the property? Check all that apply Single-family home			
3488 Wood		scription		Single-family home Duplex or multi-unit building Condominium or cooperative	amount of a	any secured claim	s or exemptions. Put th s on <i>Schedule D:</i> Secured by Property.
3488 Wood Street address, if	if available, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	amount of a Creditors V	any secured claim Vho Have Claims	s on Schedule D: Secured by Property.
3488 Wood	if available, or other des	44121-0000 ZIP Code		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	any secured claim Vho Have Claims	s on Schedule D: Secured by Property. Current value of the portion you own?
3488 Wood Street address, if	if available, or other des	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	amount of a Creditors V Current va entire prop \$11	any secured claims Any horizontal Have Claims Alue of the lerty? I 10,000.00 The nature of your	s on Schedule D: Secured by Property.
3488 Wood Street address, if	if available, or other des	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop	lue of the lerty? In a nature of your se simple, tenance), if known.	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0
3488 Wood Street address, it Cleveland City	Hts. OH	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	amount of a Creditors V Current va entire prop \$11 Describe ti (such as fe	lue of the lerty? In a nature of your se simple, tenance), if known.	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0
3488 Wood Street address, if	Hts. OH	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$11 Describe ti (such as fe a life estate	any secured claims who Have Claims who Have Claims who have of the perty? 10,000.00 the nature of your be simple, tenance be), if known.	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0 r ownership interest by by the entireties, or
3488 Wood Street address, it Cleveland City Cuyahoga	Hts. OH	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	amount of a Creditors V Current va entire prop \$11 Describe ti (such as fe a life estate Fee sim	lue of the lerty? In a nature of your se simple, tenance), if known.	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0 r ownership interest by by the entireties, or
3488 Wood Street address, it Cleveland City Cuyahoga	Hts. OH	44121-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	amount of a Creditors V Current valentire prop \$11 Describe ti (such as fe a life estate Fee sim	any secured claims who Have Claims who Have Claims who have claims who have of the left of	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0 r ownership interest by by the entireties, or
Street address, it Cleveland City Cuyahoga	Hts. OH	44121-0000	Who Other	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite	amount of a Creditors V Current valentire prop \$11 Describe ti (such as fe a life estate Fee sim	any secured claims who Have Claims who Have Claims who have claims who have of the left of	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0 r ownership interest by by the entireties, or
Cleveland City Cuyahoga	Hts. OH	44121-0000	Who Other	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another r information you wish to add about this ite erty identification number: I: 681-32-010	amount of a Creditors V Current valentire prop \$11 Describe ti (such as fe a life estate Fee sim	any secured claims who Have Claims who Have Claims who have claims who have of the left of	s on Schedule D: Secured by Property. Current value of the portion you own? \$110,000.0 r ownership interest by by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	or 1 K	atrina L. Tr	rice		Case number (if known)	
3. C a	ars, vans,	trucks, trac	tors, sport utility ve	ehicles, motorcycles		
п	No					
	Yes					
_	103					
3.1	Make:	Chevrole	t	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Monte Ca	arlo	■ Debtor 1 only		ured claims on Schedule D: laims Secured by Property.
	Year:	2007		Debtor 2 only	Current value of the	Current value of the
		nate mileage:	100,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:		At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00
5 A .p Part Do y	ages you 3: Descri ou own o	be Your Person have any l	ed for Part 2. Write nal and Household Ite egal or equitable in furnishings	on for all of your entries from Part 2, including that number hereems enterest in any of the following items? s, china, kitchenware		\$3,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
		escribe				
			Household God	ods		\$1,500.00
Ē	l No	Televisions a	phones, cameras, r	eo, stereo, and digital equipment; computers, prin nedia players, games Electronic Devices	iters, scanners; music colle	ections; electronic devices
9. E (xamples: No Yes. De	other collections scribe for sports a	ons, memorabilia, co nd hobbies ographic, exercise, a	prints, or other artwork; books, pictures, or other a illectibles		
10. F	No Yes. De Firearms		s shotalins ammun	ition, and related equipment		
	No ,	: Pistols, rifle:	s, snotguns, ammun	ition, and related equipment		
				Schedule A/B: Property		page 2
Offici	al Form 1	06A/B		Schedule A/B: Property		page 2

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Best Case Bankruptcy

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Debtor	1 Katrina L. Trice			Case number (if known)	
11. Clo <i>Ex</i>	amples: Everyday clothes, fu	ırs, leather coats, desi	gner wear, shoes, accessor	ies	
■ Y	es. Describe				
	Cloth	ina			\$400.00
	Cloth	ing			
■ N	amples: Everyday jewelry, c	ostume jewelry, engag	ement rings, wedding rings,	heirloom jewelry, watches, gems,	gold, silver
-	n -farm animals amples: Dogs, cats, birds, h	orses			
■ N □ Y	lo es. Describe				
14. A ny ■ N	•	ehold items you did n	not already list, including a	any health aids you did not list	
	es. Give specific informatio	١			
	dd the dollar value of all of r Part 3. Write that numbe			for pages you have attached	\$2,400.00
Part 4:	Describe Your Financial Asse	ts			
Do you	own or have any legal or	equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	amples: Money you have in	•	, ,	nd on hand when you file your petiti	on
				Cash	\$20.00
Ex	institutions. If you h lo		with the same institution, lis	shares in credit unions, brokerage t each.	houses, and other similar
■ Y	es		Institution name:		
	17.1.	Debit Card	PNC		\$455.00
Ex ■ N	nds, mutual funds, or publ amples: Bond funds, investn lo		,	t accounts	
an —	d joint venture	l interests in incorpo	rated and unincorporated	businesses, including an interes	st in an LLC, partnership,
■ N □ Y	es. Give specific informatio	n about them		% of ownership:	
Ne	vernment and corporate be gotiable instruments include in-negotiable instruments are	onds and other negot personal checks, cash	niers' checks, promissory no	instruments otes, and money orders.	

Official Form 106A/B Schedule A/B: Property

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Best Case Bankruptcy

page 3

Deb	tor 1	Katrina L. Trice	•		Case number (if known)	
	No No		-Canabaut than			
	J Yes. G	ive specific inform	ation about them Issuer name:			
			issuel flame.			
		ent or pension ac es: Interests in IRA		, 403(b), thrift savings accounts, or other	er pension or profit-sharing pl	ans
	Yes. Li	st each account se	eparately.			
		-	Type of account:	Institution name:		
		ı	PERS	Cuyahoga County		Unknown
			Deferred Comp	Cuyahoga County		Unknown
_	Your sha <i>Example</i>		eposits you have made	so that you may continue service or use nt, public utilities (electric, gas, water), te		es, or others
	No Yes			Institution name or individual:		
23. <i>I</i>	Annuitie	s (A contract for a	periodic payment of mo	oney to you, either for life or for a numbe	er of years)	
	No Yes	lssue	r name and description.			
			RA, in an account in a A(b), and 529(b)(1).	qualified ABLE program, or under a	qualified state tuition prog	ram.
	No Yes			ion. Separately file the records of any in	terests 11 U.S.C. & 521(c):	
			·	(other than anything listed in line 1),	· · · · · · · · · · · · · · · · · · ·	cicable for your benefit
	No	equitable of future	e interests in property	(other than anything listed in line 1),	and rights of powers exert	disable for your benefit
	Yes. G	Give specific inform	nation about them			
	Example			and other intellectual property eeds from royalties and licensing agree	ments	
	No Yes. G	Give specific inform	nation about them			
			other general intangil s, exclusive licenses, co	bles operative association holdings, liquor lic	censes, professional licenses	S
	No Yes. G	Give specific inform	nation about them			
						Command value of the
WOT	iey or pr	operty owed to y	ou ?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Γ ax refu l	nds owed to you				
_		ive specific inform	ation about them, includ	ling whether you already filed the return	s and the tax years	
			2018		Federal	Unknown
	Family s	• •	np sum alimony, spousa	ıl support, child support, maintenance, c	livorce settlement, property s	settlement
_	Lxampie I No	.c. i dot ddo di idii	.p Jam aminony, spousa	especit, erms oupport, maintenance, c		
	Yes. G	ive specific inform	ation			

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	Katrina L. Trice	Case number (if known)	
30.	Examp	amounts someone owes you les: Unpaid wages, disability insurance payments, disability benefi benefits; unpaid loans you made to someone else	ts, sick pay, vacation pay, workers' compe	ensation, Social Security
	■ No □ Yes.	Give specific information		
31.		ts in insurance policies bles: Health, disability, or life insurance; health savings account (HS	SA); credit, homeowner's, or renter's insura	ance
	■ No			
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insune has died.	rance policy, or are currently entitled to red	ceive property because
	☐ Yes.	Give specific information		
	Examp ■ No	against third parties, whether or not you have filed a lawsuit of ples: Accidents, employment disputes, insurance claims, or rights to Describe each claim		
34.		contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights t	o set off claims
	■ No			
	☐ Yes.	Describe each claim		
35.	Any fin ■ No	ancial assets you did not already list		
		Give specific information		
36		he dollar value of all of your entries from Part 4, including any art 4. Write that number here		\$475.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
37	Do you o	wn or have any legal or equitable interest in any business-related prope	rtv?	
	No. Go	, , , , , , , , , , , , , , , , , , , ,	-9-	
[☐ Yes. G	to to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or ou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or co	mmercial fishing-related property?	
	☐ Yes.	Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did No	t List Above	
53.		have other property of any kind you did not already list? les: Season tickets, country club membership		
		Give specific information		
5 /	۸ ط ط 4	he dollar value of all of your entries from Part 7. Write that nur	mhar hara	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Deb	tor 1 Katrina L. Trice		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$110,000.00
56.	Part 2: Total vehicles, line 5	\$3,000.00		
57.	Part 3: Total personal and household items, line 15	\$2,400.00		
58.	Part 4: Total financial assets, line 36	\$475.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,875.00	Copy personal property total	\$5,875.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$115,875.00

Official Form 106A/B Schedule A/B: Property page 6 Best Case Bankruptcy

Permanent 681-32-010 Parcel #:

CUYAHOGA COUNTY
OFFICE OF FISCAL OFFICER - 2
DEED 9/5/2014 3:02:55 PM

201409050613

Type Instrument: Warranty Deed
Tax District #: 3110

Grantee: COLLINS, KATRINA
Balance Assumed: \$ 0.00
Total Consideration: \$ 71,500.00
Conv. Fee Paid: \$ 286.00
Transfer Fee Paid: \$ 0.50
Fee Paid by: Nova Title Agency, Inc.
Exempt Code:

Date: 9/5/2014 2:39:00 PM
Tax List Year: 2014
Land Use Code: 5100
Land Value: 22,700
Building Value: 92,100
Total Value: 114,800
Arms Length Sale: UNKNW
Rcpt: H-09052014-20
Inst #: 662717
Check #: 2447

Mark a Park fr

Cuyahoga County Fiscal Officer

NOVA T14-1818/ssampsel After Recording Return To:
Nova Title Agency, Inc.
30455 Solon Road
Solon, OH 44139

GENERAL WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS;

That MM, LLC, a Utah limited liability company, the Grantor, for valuable consideration of Ten Dollars (\$10.00) paid, grants with general warranty covenants to: Katrina Collins, the Grantee, whose TAX MAILING ADDRESS will be 3488 Woodridge Road, Cleveland Heights, OH 44121, the following described premises:

Situated in the City of Cleveland Heights, County of Cuyahoga and state of Ohio, and known as being Sublot No. 117 in the Shaker Heights Improvement Company's Subdivision No. 5 of part of Original Euclid Township Lots Nos. 13 and 54 as shown by the recorded plat in Volume 82 of Maps, Page 12 of Cuyahoga County Records, as appears by said plat, be the same more or less, but subject to all legal highways.

Parcel No. 681-32-010 Property address: 3488 Woodridge Road, Cleveland Heights OH 44121 Prior Deed Reference: Inst. No. 201002100380

TO HAVE AND TO HOLD said premises, with the appurtenances thereunto belonging, to the said Grantee, her heirs and assigns forever.

And the said Grantor, its successors and assigns, hereby covenants with the said Grantee, her heirs and assigns, that said premises are free and clear from all encumbrances whatsoever, by, from, through or under said Grantor, EXCEPT restrictions, easements, rights, reservations, exceptions, limitations, agreements, covenants,

ation to identify your	case:			
Katrina L. Trice				
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		OF OHIO		
			☐ Check if this is an amended filing	
	Katrina L. Trice First Name	First Name Middle Name First Name Middle Name	Katrina L. Trice First Name Middle Name Last Name First Name Middle Name Last Name	Katrina L. Trice First Name Middle Name Last Name First Name Middle Name Last Name cruptcy Court for the: NORTHERN DISTRICT OF OHIO

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1	Which set of exemptions are you cla	imina? Chack and only	avan if your enauca i	ic filing with you

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Current value of the Amount of the exemption you claim

Schedule A/B that lists this property	portion you own				
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
3488 Woodridge Road Cleveland Hts., OH 44121 Cuyahoga County	\$110,000.00		\$136,925.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
PPN: 681-32-010 See Attached Legal Description Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(1)	
2007 Chevrolet Monte Carlo 100,000 miles	\$3,000.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(2)	
Household Goods Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Enternolli Gonodalo 702. GTT			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(: 1)(2)	
TVs and Other Electronic Devices Line from Schedule A/B: 7.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Ente from Gonodato 702. TT			100% of fair market value, up to any applicable statutory limit	2020:00(1)(4)(0)	
Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Enteriori Conodale 7VD. TTT			100% of fair market value, up to any applicable statutory limit	2020:00(: 5)(: 5)(4)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

De	ebtor 1 Katrina L. Trice			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
				100% of fair market value, up to any applicable statutory limit	
	Debit Card: PNC Line from Schedule A/B: 17.1	\$455.00		\$455.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line Holli Governo, V.Z. 1111			100% of fair market value, up to any applicable statutory limit	2020100(1.1)(0)
	PERS: Cuyahoga County Line from Schedule A/B: 21.1	Unknown		100%	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
	Line from Governo V.E. 2111			100% of fair market value, up to any applicable statutory limit	2020.00(//)(10)(0)
	Deferred Comp: Cuyahoga County Line from Schedule A/B: 21.2	Unknown		100%	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
	Line from Genedate Av.B. 2112			100% of fair market value, up to any applicable statutory limit	2020.00(7)(10)(0)
	Federal: 2018 Line from Schedule A/B: 28.1	Unknown		\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Line from Generalie A.B. 2011			100% of fair market value, up to any applicable statutory limit	2020:00(1)(10)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			filed on or after the date of adjustme	ent.)
	☐ Yes. Did you acquire the property cove☐ No	red by the exemption w	rithin 1	,215 days before you filed this case	9?
	□ Vos				

Fill in this information	n to identify you	r case:				
Debtor 1 Ka	atrina L. Trice					
Firs	st Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) Firs	st Name	Middle Name	Last Name			
United States Bankrupt		NORTHERN DISTRICT				
Office States Barikrupt	toy Court for the.	TOTALIST DIOTAGE	01 01110			
Case number						
(if known)					_	t if this is an ded filing
					amend	aed ming
Official Form 10	6D					
Schedule D: (Creditors	Who Have Clair	ms Secured	hy Property	,	12/15
	or cartor c	Title Have Glan	1110 00001 00	<i>by</i> 1.10po.15	<u>'</u>	
		two married people are filing t number the entries, and attach				
1. Do any creditors have c	laims secured by	your property?				
☐ No. Check this b	oox and submit th	nis form to the court with you	ır other schedules. You	u have nothing else t	o report on this form.	
Yes. Fill in all of	the information I	pelow.				
Part 1: List All Sec	ured Claims					
		ore than one secured claim, list t	he creditor senarately for	Column A	Column B	Column C
each claim. If more than o	ne creditor has a pa	articular claim, list the other crediter according to the creditor's name	tors in Part 2. As much	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 PNC		Describe the property that see	cures the claim:	\$96,000.00	\$110,000.00	\$0.00
PO Box 8703 Dayton, OH 45	401	3488 Woodridge Road Hts., OH 44121 Cuyaho PPN: 681-32-010 See Attached Legal De As of the date you file, the cla apply.	oga County escription			
Number, Street, City, S		☐ Contingent☐ Unliquidated				
Number, Street, Sity, S	tate & Zip Code	☐ Disputed				
Who owes the debt? Cl	heck one.	Nature of lien. Check all that	apply.			
Debtor 1 only		■ An agreement you made (su	uch as mortgage or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lie	en, mechanic's lien)			
☐ At least one of the debt	tors and another	☐ Judgment lien from a lawsui				
☐ Check if this claim rel community debt	lates to a	Other (including a right to of	fset)			
Date debt was incurred	2014	Last 4 digits of accoun	t number 0051			
Add the dollar value of	your entries in Co	lumn A on this page. Write tha	t number here:	\$96,00	0.00	
If this is the last page o	f your form, add th	ne dollar value totals from all p		\$96,00		
Write that number here	:			Ψ30,00	0.00	
Part 2: List Others to	o Be Notified for	a Debt That You Already	Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in t	his inform	nation to identify your	case:					
Debtor	1	Katrina L. Trice						
		First Name	Middle Na	ame	Last Name	_		
Debtor : (Spouse if		First Name	Middle Na	ame	Last Name			
United :	States Ban	kruptcy Court for the:	NORTHERN	I DISTRICT OF O	HIO			
Cooo n	umbor							
Case no				_			_	heck if this is an mended filing
Officia	al Form	106E/F						
		/F: Creditors W	/ho Have	Unsecured	Claims			12/15
he Conti	inuation Pag if known).		ve no information	n to report in a Part		u need, fill it out, number the at Part. On the top of any add		
		s have priority unsecured						
	No. Go to Pa			,,				
_ \		ut 2.						
		of Your NONPRIORIT	TY Unsecured	Claims				
		s have nonpriority unsec						
	No. You have	e nothing to report in this pa	art. Submit this fo	orm to the court with	your other sche	dules.		
	Yes.							
clain	n, list the cre	editor separately for each cl	laim. For each cla	aim listed, identify wh	nat type of claim	holds each claim. If a creditor it is. Do not list claims already priority unsecured claims fill ou	included in Part	If more than one
4.1		nce Now		Last 4 digits of acc	ount number	2254		\$1,437.42
	7767 Me	Creditor's Name ntor Avenue	,	When was the debt	t incurred?	2018		
-		OH 44060 reet City State Zip Code		As of the date you	file, the claim i	s: Check all that apply		
	_	red the debt? Check one.		☐ Contingent				
	■ Debtor 1	-		☐ Unliquidated				
	☐ Debtor 2	2 only		□ Disputed				
	Debtor 1	1 and Debtor 2 only		Type of NONPRIOR	RITY unsecured	d claim:		
	☐ At least	one of the debtors and and	other	☐ Student loans				
		f this claim is for a comn n subject to offset?	•	☐ Obligations arisin report as priority claim	•	ration agreement or divorce th	at you did not	
	■ No			☐ Debts to pension	n or profit-sharin	g plans, and other similar debt	S	
	☐ Yes			Other. Specify	Loan			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 14

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AES/PNC	Last 4 digits of account number 5PAO	\$8,061.0
Nonpriority Creditor's Name		
PO Box 61047	When was the debt incurred? 2008	
Harrisburg, PA 17106-1047 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
■ Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	_	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	t you did not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	☐ Other. Specify	
_ 163	Student Loan	
	Oludent Loan	
ATT Uverse	Last 4 digits of account number	\$326.0
Nonpriority Creditor's Name c/o ERC	When was the debt incurred? 2016	
PO Box 57547		
Jacksonville, FL 32241		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<u></u>	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	t you did not
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Cable/Internet Service	
Capital One Auto Finance	Last 4 digits of account number XXXX	\$3,973.0
Nonpriority Creditor's Name		
CB Disputes Team PO Box 259407	When was the debt incurred? 2011	
Plano, TX 75025-9407		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that	t you did not
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Auto Loan Deficiency	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 14

Capital One/Cabelas	Last 4 digits of account number	xxxx	\$1,762.0
Nonpriority Creditor's Name	-		+ -,
PO Box 3021	When was the debt incurred?	2018	
Salt Lake City, UT 84130-0281 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	<u> </u>	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
☐ At least one of the debtors and another	Student loans	u ciaiii.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	aration agreement of divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Care	d	
Charter Communications	Last 4 digits of account number	xxxx	\$426.0
Nonpriority Creditor's Name	When were the debt income d2	2047	
PO Box 551268	When was the debt incurred?	2017	
Jacksonville, FL 32255			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Phone Ser	vice	
City of Cleveland	Last 4 digits of account number	0996	\$313.6
Nonpriority Creditor's Name Division of Water	When was the debt incurred?	2017	
PO Box 94540	when was the debt incurred?	2017	
Cleveland, OH 44101-4540			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Utility Serv	vice	

Schedule E/F: Creditors Who Have Unsecured Claims

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Cleveland Heights Utilities Dept.	Last 4 digits of account number	3007	\$24
Nonpriority Creditor's Name			Ψ=-
40 Severance Circle Cleveland Hts., OH 44118	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Utility Serv	rice	
Comenity Bank	Last 4 digits of account number	xxxx	\$41
Nonpriority Creditor's Name c/o Midland Funding, LLC	When was the debt incurred?	2016	
2365 Northside Drive, #300	when was the debt incurred?	2010	
San Diego, CA 92108			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	□ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
\square At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	o plans, and other similar debts	
■ No □ Yes	Other, Specify Credit Card		
	— Other. Specify		
Comenity Bank	Last 4 digits of account number	xxxx	\$68
Nonpriority Creditor's Name c/o Midland Funding, LLC	When was the debt incurred?	2016	
2365 Northside Drive, #300 San Diego, CA 92108			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	Пол	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
☐ Check if this claim is for a community debt		and the second s	
Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
— 110	The state of the s	d	

Schedule E/F: Creditors Who Have Unsecured Claims

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Comenity Bank	Last 4 digits of account number	xxxx	\$314.00
Nonpriority Creditor's Name c/o Portfolio Recovery 120 Corporate Blvd., #100	When was the debt incurred?	2016	φ314.00
Norfolk, VA 23502			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	1	
Comenity Bank/Victoria's Secret	Last 4 digits of account number	xxxx	\$1,042.00
Nonpriority Creditor's Name Bankruptcy Notice PO Box 182125	When was the debt incurred?	2014	
Columbus, OH 43218-2125			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
Debtor 2 only	Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	1	
Coment Loans	Last 4 digits of account number		\$288.81
Nonpriority Creditor's Name Tonto Apache Reservations Payson, AZ 85541	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	По ::		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
☐ At least one of the debtors and another	Student loans	. otaliii.	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as profity claims		
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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		*
Jared Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$1,733.0
c/o Resurgent Cap Svs, LP PO Box 1269	When was the debt incurred? 2014	
Greenville, SC 29602 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Kohls Department Store	Last 4 digits of account number XXXX	\$380.0
Nonpriority Creditor's Name PO Box 3115 Milwaukee, WI 53201-3115	When was the debt incurred? 2014	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Line of Credit Now	Last 4 digits of account number	\$664.
Nonpriority Creditor's Name c/o TransUnion P.O. Box 1000	When was the debt incurred? 2018	
Crum Lynne, PA 19022 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Continued	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	

Schedule E/F: Creditors Who Have Unsecured Claims

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Money Key	Last 4 digits of account number	xxxx	\$211
Nonpriority Creditor's Name c/o Plaza Services 110 Hammond Drive	When was the debt incurred?	2016	
Atlanta, GA 30328 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Loan		
Nelnet Loan Services	Last 4 digits of account number	xxxx	\$44,653
Nonpriority Creditor's Name 3015 S. Parker Rd, #400 Denver, CO 80201	When was the debt incurred?	2005	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Student Lo	an	
NeInet Loan Services Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$34,839
3015 S. Parker Rd., #400 Denver, CO 80201-1649	When was the debt incurred?	2005	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

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Northand Ohio Parienal District	Look 4 digito of account number	0674	\$40
Northeast Ohio Regional District Nonpriority Creditor's Name	Last 4 digits of account number	9671	\$40
PO Box 94970 Cleveland, OH 44101	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
•	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Utility Serv	rice	
Ohio First Class Credit Union	Last 4 digits of account number	xxxx	\$81
Nonpriority Creditor's Name PO Box 5877	When was the debt incurred?	20112	
Cleveland, OH 44101-0877			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	autoria di anticio di anticio di anticio di anticio	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Loan		
Portfolion Recovery/Capital One	Last 4 digits of account number	9842	\$2,44
Nonpriority Creditor's Name c/o Viktoriya Dyrda Javitch Block	When was the debt incurred?	2016	
1100 Superior Ave., 19th Floor Cleveland, OH 44114			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
_	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	■ Other. Specify Credit Card	4	

Schedule E/F: Creditors Who Have Unsecured Claims

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December 2011 and 21 and 21			A4 400 00
Premier Smiles Orthodontics Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$1,490.00
c/o Receivable Recovery 110 Veterans Memorial Blvd, #445 Metairie, LA 70005	When was the debt incurred?	2015	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Dental		
Progressive Leasing	Last 4 digits of account number	5050	\$1,467.88
Nonpriority Creditor's Name 256 W. Data Dr. Draper, UT 84020	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Furniture F	Rental	
Rodier Law Firm	Last 4 digits of account number		\$338.00
Nonpriority Creditor's Name 6100 Oak Tree Blvd., #200 Independence, OH 44131	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
\square At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Legal Fees		

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

Sky Cash USA	Last 4 digits of account number	\$390.0
Nonpriority Creditor's Name 2637 E. Atlantice Blvd., #31889 Pompano Beach, FL 33062	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
■ Debtor 1 only	☐ Unliquidated	
☐ Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
Spotloan	Last 4 digits of account number	\$1,154.41
Nonpriority Creditor's Name PO Box 720	When was the debt incurred? 2018	
Belcourt, ND 58316-0720 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Loan	
St.Margaret and St. Gregory CU	Last 4 digits of account number XXXX	\$9,471.00
Nonpriority Creditor's Name 1499 Dean Drive	When was the debt incurred? 2018	
South Euclid, OH 44121	2010	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Co-signor - automobile	

Schedule E/F: Creditors Who Have Unsecured Claims

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			*
Synchrony Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$430.00
c/o Portfolio Recovery 120 Corporate Blvd., #100	When was the debt incurred?	2014	
Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Care	d	
Synchrony	Last 4 digits of account number	xxxx	\$2,588.00
Nonpriority Creditor's Name c/o Portfolio Recovery 120 Corporate Blvd., #100	When was the debt incurred?	2016	
Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	☐ Student loans	d dam.	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d	
Synchrony Bank	Last 4 digits of account number	xxxx	\$735.00
Nonpriority Creditor's Name c/o Cavalry Portfolio Svcs 500 Summit Lake Dr., 4A	When was the debt incurred?	2016	
Valhalla, NY 10595 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	По г		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Credit Care	<u>م</u>	

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

			A
Synchrony Bank/Ashley Nonpriority Creditor's Name	Last 4 digits of account number	0925	\$2,587.00
Attn: Bankruptcy Dept. PO Box 965064	When was the debt incurred?	2014	
Orlando, FL 32896-5064 Number Street City State Zip Code	As of the date you file, the claim i	ie: Chack all that apply	
Who incurred the debt? Check one.	☐ Contingent	в. Опеск ан шасарріу	
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d	
Synchrony Bank/Walmrt	Last 4 digits of account number	xxxx	\$735.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965064	When was the debt incurred?	2014	
Orlando, FL 32896-5064 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d	
TD Bank USA/Target Credit	Last 4 digits of account number	xxxx	\$538.00
Nonpriority Creditor's Name NCD-0450	When was the debt incurred?	2014	
PO Box 1470	mon was the dest meaned.	2017	
Minneapolis, MN 55440			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
_	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	•,	
Yes	■ Other. Specify Credit Card	d	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1	Katrina L.	. Trice		Case nu	umber (if known)		
	erizon Wir		Last 4 digits of account number	xxxx	<u>: </u>		\$1,716.00
10	6 McLelan	on Capital System d Road I, MN 56303	When was the debt incurred?	2017			
		City State Zip Code	As of the date you file, the claim is	: Check	all that apply		
w	/ho incurred t	he debt? Check one.	☐ Contingent				
	Debtor 1 only	y	☐ Unliquidated				
	Debtor 2 only	y	☐ Disputed				
	Debtor 1 and	Debtor 2 only	Type of NONPRIORITY unsecured	claim:			
	At least one	of the debtors and another	☐ Student loans				
	Check if this	s claim is for a community debt	☐ Obligations arising out of a separ	ation ag	reement or divorce that you	did not	
Is	the claim sul	eject to offset?	report as priority claims		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	No		☐ Debts to pension or profit-sharing	plans, a	and other similar debts		
	Yes		■ Other. Specify Cellular Ser	vice			
4.36 V	Vebbank/F	ingerhut	Last 4 digits of account number	xxxx			\$668.00
6:	onpriority Cred 250 Ridge Saint Cloud		When was the debt incurred?	2014			
		City State Zip Code	As of the date you file, the claim is	: Check	all that apply		
W	/ho incurred t	he debt? Check one.	☐ Contingent				
	Debtor 1 only	y	☐ Unliquidated				
	Debtor 2 only	y	☐ Disputed				
	Debtor 1 and	Debtor 2 only	Type of NONPRIORITY unsecured	claim:			
	At least one	of the debtors and another	Student loans	Oldiii.			
	Check if this	s claim is for a community debt	☐ Obligations arising out of a separ	ation an	reement or divorce that you	did not	
		oject to offset?	report as priority claims	ation ag	recinent of divorce that you	did flot	
	No		☐ Debts to pension or profit-sharing	plans, a	and other similar debts		
	Yes		Other. Specify Credit Card				
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
trying to more that any debte Part 4:	collect from your one creditors in Parts 1 one	you for a debt you owe to someone or for any of the debts that you liste r 2, do not fill out or submit this pa nounts for Each Type of Unse	_	ts 1 or 2 reditors	, then list the collection ag here. If you do not have a	gency here. Simi dditional person	larly, if you have as to be notified for
	0-	Domostio gument al-liti		6-	Total Claim	0.00	
Total clain	6a. ns	Domestic support obligations		6a.	\$	0.00	
from Part		Taxes and certain other debts yo	u owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal inju	•	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.00	
					Total Claim		
Total clain	6f.	Student loans		6f.		,553.00	
from Part			ration agreement or divorce that you	6g.	\$	0.00	
	6h.	did not report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	6h.	\$	0.00	

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

Total Nonpriority. Add lines 6f through 6i.

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42,193.48

129,746.48

6j.

6j.

Fill in this information to identify your case:						
Debtor 1	Katrina L. Trice					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO			
Case number						
(if known)					Check if this is an	
					amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2			·		
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	s information to identify you	case:			
Debtor 1	Katrina L. Trice First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case num (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
people are fill it out, a your name	e filing together, both are equand number the entries in the eard case number (if known	ually responsible for sule boxes on the left. Atta). Answer every question	pplying correct informat ch the Additional Page t on.	tion. If more space is not this page. On the top	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
_	you have any codebtors? (If	you are filing a joint case	e, do not list either spouse	as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have yo na, California, Idaho, Louisiana				
	o. Go to line 3. ss. Did your spouse, former spo	ouse, or legal equivalent li	ve with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guara	antor or cosigner. Make	sure you have listed the	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	e
	Name			☐ Schedule E/F, li ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code	_	

Fill	in this information to identify your o	ase:				ı				
	otor 1 Katrina L. T									
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF OHIO							
Of So	fficial Form 1061 chedule I: Your Incurrence of the complete and accurate as posplying correct information. If you				and De	3 income MM / DD/ btor 2), be	d filing ent showing postpetition chapte as of the following date: YYY 12 th are equally responsible fo		12/1	
spo atta	t1: Describe Employment	ır spouse is not filing w	ith you, do not incl	ude info	rmat	ion abou	ıt your sp	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed□ Not employed				☐ Empl	oyed mployed		
		Occupation	Case Worker							
	Include part-time, seasonal, or self-employed work.	Employer's name	Cuyahoga Cou	nty						
	Occupation may include student or homemaker, if it applies.	Employer's address	Cleveland							
		How long employed t	here? 16 Yea	rs						
Par	t 2: Give Details About Mo	nthly Income								
spou	mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have m	·		·				·	•	
•	e space, attach a separate sheet to					For De	·	For Del	btor 2 or	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4	,888.00	\$	N/A	-
3.	Estimate and list monthly over		3.	+\$		0.00	+\$	N/A	-	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	4,8	88.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

No.

Combined monthly income

Filli	n this information	on to identify yo	ur case:			_			
Debt	or 1	Katrina L. Tri	се			_	eck if this is:	Sling	
Debt (Spo	or 2 buse, if filing)							showing postpetition chap as of the following date:	ter
Unite	ed States Bankrup	otcy Court for the:	NORTH	IERN DISTRICT OF OHI	0		MM / DD / YY	YY	
1	e number nown)								
Of	ficial For	m 106J							
Sc	hedule .	J: Your E	Expen	ises				1	12/15
Be a	as complete ar ormation. If mo nber (if known	nd accurate as re space is nee). Answer every	possible. eded, atta y question	. If two married people ich another sheet to thi				ble for supplying correct vrite your name and case	
Part 1.	1: Describ	e Your Housel	hold						
	■ No. Go to I	ine 2.	n a separ	ate household?					
	□ No □ Yes	s. Debtor 2 mus	t file Offici	ial Form 106J-2, <i>Expen</i> s	es for Separate Hous	ehold of D	ebtor 2.		
2.	Do you have	dependents?	□ No						
	Do not list Del and Debtor 2.	btor 1	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent age	's Does dependent live with you?	
	Do not state the				Son		 19	□ No	
	dependents na	ames.							
								Yes	
								□ No □ Yes	
								☐ Yes ☐ No	
								☐ Yes	
3.		enses include people other th your depender	nan 🗖	No Yes					
exp	mate your exp		ur bankrı	uptcy filing date unless				a Chapter 13 case to repo top of the form and fill in	
the	•	assistance and		government assistance cluded it on <i>Schedule I</i> .	•		Your	expenses	
4.		home ownersh any rent for the		ses for your residence or lot.	. Include first mortgag	e 4.	\$	1,139.00	
	If not include	d in line 4:							
	4a. Real es	tate taxes				4a.	\$	0.00	
		y, homeowner's				4b.	:	50.00	
		naintenance, re _l wner's associati		upkeep expenses		4c. 4d.		100.00 0.00	
5				aominium aues aur residence , such as h	ama aguitu lagas	40. 5	ψ	0.00	

Debtor 1	Katrina L. Trice	Case num	ber (if known)	
114:1	4ioo.		_	
6. Util 6a.	ties: Electricity, heat, natural gas	6a.	\$	310.00
6b.	Water, sewer, garbage collection	6b.	· ·	200.00
			·	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	241.00
6d.	Other. Specify:	6d.	· .	0.00
	d and housekeeping supplies	7.	· ·	560.00
	dcare and children's education costs	8.	\$	0.00
. Clo	hing, laundry, and dry cleaning	9.	\$	175.00
D. Per	sonal care products and services	10.	\$	60.00
1. Med	lical and dental expenses	11.	\$	80.00
2. Tra i	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	200.00
3. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	ritable contributions and religious donations	14.	\$	0.00
	irance.		·	
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	150.00
	Other insurance. Specify:	15d.	\$	0.00
_	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
	allment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	· ·	0.00
		— 17d. 17d.		
	Other. Specify:		a	0.00
	r payments of alimony, maintenance, and support that you did not report as		\$	0.00
ded	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	·	
	er payments you make to support others who do not live with you.		\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on School			
	Mortgages on other property	20a.	·	0.00
	Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
1. Oth	er: Specify:	21.	+\$	0.00
				0.00
	culate your monthly expenses			
	Add lines 4 through 21.		\$	3,415.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	3,415.00
	culate your monthly net income.	225	¢	2 207 00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,397.00
23b	Copy your monthly expenses from line 22c above.	23b.	-5	3,415.00
23c	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-18.00
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your refication to the terms of your mortgage?			or decrease because of a
	'es. Explain here:			
<u></u> Ц	co. Explain note.			

Fill in this info	rmation to identify your	caso:			
		case.			
Debtor 1	Katrina L. Trice	Middle Name	Last	t Name	_
Debtor 2	. not reallo	madio Hamo	2001		
(Spouse if, filing)	First Name	Middle Name	Last	t Name	_
United States B	ankruptcy Court for the:	NORTHERN DISTR	ICT OF OHIO		_
Case number					
(if known)					☐ Check if this is an amended filing
Official For Declara	-	n Individua	al Debto	or's Schedules	12/15
If two married p	people are filing togethe	r, both are equally re	sponsible for s	supplying correct information	on.
obtaining mone		n connection with a b			e statement, concealing property, or 250,000, or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an a	ttorney to help	you fill out bankruptcy form	ns?
■ No					
☐ Yes.	Name of person				h Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the s	summary and s	chedules filed with this dec	claration and
X /s/ Ka	trina L. Trice		х		
Katrin	na L. Trice ure of Debtor 1			Signature of Debtor 2	
Date	February 1, 2019			Date	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Filli	n this inforn	nation to identify you	r case:			
Debt	tor 1	Katrina L. Trice	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case (if kno	e number					Check if this is an mended filing
Sta Be as	s complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write yo	
Part	1: Give D	etails About Your Ma	arital Status and Where You	ı Lived Before		
1.	What is you	current marital statu	ıs?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you	lived in the last 3 years. Do n	ot include where you live no	v.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					nity property state or territorico, Texas, Washington and V	
	■ No □ Yes. Ma	ske sure you fill out Sc	hedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	ır Income			
	Fill in the tota	al amount of income yo	nployment or from operating ou received from all jobs and have income that you receive	all businesses, including par		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,421.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Official Form 107

Case number (if known)

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Official Form 107

Debtor 1

Katrina L. Trice

Best Case Bankruptcy

page 3

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	tcy, did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con		_	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	disaster, or gambling?	cy or since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other
	Yes. Fill in the details.			
	how the loss occurred In	escribe any insurance coverage for the loss clude the amount that insurance has paid. List ending insurance claims on line 33 of Schedule A/B: roperty.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services requires.		erty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Martin Baker, Esq. 55 Public Square, Suite 1330 Cleveland, OH 44113	\$655.00 - Attorney Fees	January, 2019	\$655.00
17.	promised to help you deal with your credite. Do not include any payment or transfer that you No	cy, did you or anyone else acting on your behalf pay ors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	erty to anyone who
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Case number (if known)

Official Form 107

Debtor 1 Katrina L. Trice

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do include gifts and transfers that you have already listed on this statement. ■ No □ Yes. Fill in the details. 							
	Person Who Received Transfer Address	Description and value of property transferred		payme	ibe any property or ents received or debts n exchange	Date transfer was made	
	Person's relationship to you						
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which y beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 							
	Name of trust	Description and	value of the prop	erty trans	sferred	Date Transfer was	
	name of tract	2000 phon and	value of the prop	orty trans	3101100	made	
Par	List of Certain Financial Accounts, Instru	uments, Safe Depos	it Boxes, and Sto	orage Unit	ts		
20.	Within 1 year before you filed for bankruptcy, v	were any financial a	ccounts or instru	ıments he	eld in your name, or for yo	our benefit, closed,	
	sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No				it; shares in banks, credi	t unions, brokerage	
	Yes. Fill in the details.	and Auditable of	T (D-1	Last balance	
		ast 4 digits of ccount number	• •		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ır before you filed fo	r bankruptcy, an	y safe de _l	posit box or other deposi	tory for securities,	
	No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	place other than you	r home within 1	year befo	re you filed for bankrupto	y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.		lude any property	y you bor	rowed from, are storing f	or, or hold in trust	
	■ No						
	Yes. Fill in the details.	Where is the pre-	m a mts c2	Dogoribo	the preparty	Value	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, S Code)		Describe	the property	Value	
Par	t 10: Give Details About Environmental Inform	nation					
For	the purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, or	r local statute or reg	julation concerni	ing pollut	ion, contamination, relea	ses of hazardous or	
Offici	ficial Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5						

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Best Case Bankruptcy

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Rep	ort al	I notices, releases, and proceedings the	nat you know about, regardless of whe	n the	ey occurred.						
24.	Has	any governmental unit notified you tha	at you may be liable or potentially liable	un	der or in violation of an environm	ental law?					
		■ No □ Yes. Fill in the details.									
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
25.											
		No Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and know		Date of notice					
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any envi	iron	mental law? Include settlements	and orders.					
		No Yes. Fill in the details.									
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case					
Par	t 11:	Give Details About Your Business or	Connections to Any Business								
27.	With	in 4 years before you filed for bankrup	tcy, did you own a business or have ar	ny o	f the following connections to any	/ business?					
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	, eith	her full-time or part-time						
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation										
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation								
		No. None of the above applies. Go to	Part 12.								
		Yes. Check all that apply above and fil	II in the details below for each business	s.							
		siness Name	Describe the nature of the business		Employer Identification number						
		Iress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.					
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	tcy, did you give a financial statement	to a	nyone about your business? Inclu	ıde all financial					
		No Yes. Fill in the details below.									
		Ne Iress aber, Street, City, State and ZIP Code)	Date Issued								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

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Best Case Bankruptcy

Debtor 1 Katrina L. Trice	Case number (if known)
	king a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Katrina L. Trice	
Katrina L. Trice Signature of Debtor 1	Signature of Debtor 2
Date February 1, 2019	Date
_ ' .	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
☐ Yes	
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Debtor 1	Katrina L. Trice			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	nkruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Officed States Dan	ikiupicy Court for the.	NORTHERN DIS	TRICT OF OTHO	
Case number				☐ Check if this is an
(,				amended filing
Official For	m 108			
			riduals Filing Haden Chants	7
Statemen	t of Intentio	n tor inaly	<u>/iduals Filing Under Chapte</u>	f / 12/15
f vou are an indiv	/idual filing under cha	ntor 7 vou must fi	Il out this form if	
-	claims secured by yo		ii out this form ii:	
	ed personal property a		not expired	
			· you file your bankruptcy petition or by the date set	t for the meeting of creditors,
whichev	er is earlier, unless th		ne time for cause. You must also send copies to the	
on the fo	orm			
	ople are filing together d date the form.	r in a joint case, bo	oth are equally responsible for supplying correct in	formation. Both debtors must
	nd accurate as possib ur name and case nun		s needed, attach a separate sheet to this form. On t	the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	a Sacurad Claime		
	ui Cieditois Wilo Havi	e Secureu Ciairiis		
information bel	rs that you listed in Palow.	art 1 of Schedule [D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information bel	rs that you listed in Pa	art 1 of Schedule [What do you intend to do with the property that	Did you claim the property
information bel	rs that you listed in Palow.	art 1 of Schedule [
information bel	rs that you listed in Palow. ditor and the property t	art 1 of Schedule [What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
information bel Identify the cred Creditor's PN	rs that you listed in Palow. ditor and the property t	art 1 of Schedule [What do you intend to do with the property that secures a debt?	Did you claim the property
information bel	rs that you listed in Palow. ditor and the property t	art 1 of Schedule [What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it.	Did you claim the property as exempt on Schedule C?
information bel Identify the cred	rs that you listed in Palow. ditor and the property the state of the property the state of the property the state of the s	art 1 of Schedule D hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C? □ No
Creditor's PN name: Description of property	rs that you listed in Palow. ditor and the property the state of the property the state of the property of	art 1 of Schedule D hat is collateral	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	Did you claim the property as exempt on Schedule C? □ No
information bel Identify the cred Creditor's PN name: Description of	rs that you listed in Palow. ditor and the property the state of the property the state of the property the state of the s	art 1 of Schedule D hat is collateral	What do you intend to do with the property that secures a debt? □ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]:	Did you claim the property as exempt on Schedule C? □ No
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Best Case Bankruptcy

Debtor 1 Katrina L. Trice	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about an property that is subject to an unexpired lease.	y property of my estate that secures a debt and any personal
X /s/ Katrina L. Trice X	
Katrina L. Trice Sig Signature of Debtor 1	nature of Debtor 2
Date February 1, 2019 Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

FIII II	n this information to identify your case:			eck one box o A-1Supp:	nly as d	lirected in this form and	in Form
Deb	tor 1 Katrina L. Trice			.A-13upp.			
	tor 2sif filing)			1. There is	no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	f Ohio	[applies	will be n	to determine if a presur nade under <i>Chapter 7</i>	
1	e number			_	,	icial Form 122A-2).	
(if kno	wn)					does not apply now be y service but it could ap	
			I	☐ Check if	his is a	n amended filing	
Off	icial Form 122A - 1						
	apter 7 Statement of Your Cur	rent Moi	othly Inc	ome			12/15
separ numb milita Part	·	dditional informa sumption of abu resumption of Ab	ation applies. On se because you	the top of any do not have pr	addition	al pages, write your nam onsumer debts or becaus	e and case se of qualifying
1.	What is your marital and filing status? Check one on	ıly.					
	Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou		•	2-11.			
	■ Married and your spouse is NOT filing with you.	-	•				
	☐ Living in the same household and are not lega	Illy separated.	Fill out both Co	lumns A and	B, lines	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legality in a part for reasons that do not include evading.	egally separated	d under nonban	kruptcy law th	nat appli	es or that you and you	
10 6	Il in the average monthly income that you received from all so 01(10A). For example, if you are filing on September 15, the 6-mo months, add the income for all 6 months and divide the total by 6. e same rental property, put the income from that property in one of	nth period would b Fill in the result. I	oe March 1 throug Do not include any	h August 31. If income amou	the amount more the	nt of your monthly income nan once. For example, if b	varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).	and commission	ons (before	\$ 4,88	88.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regulary I, your depende to the couse only if Co	r contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,						
			tor 1				
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
	Ordinary and necessary operating expenses		Copy here ->	c	0.00	\$	
	Net monthly income from a business, profession, or farm	n \$	Copy liele ->	Ψ	J.00	Ψ	
6.	Net income from rental and other real property	Deh	tor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property		Copy here ->	\$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

Chapter 7 Statement of Your Current Monthly Income

0.00

\$

page 1

Best Case Bankruptcy

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$	•	
	Do not enter the amount if you contend that the amoun under the Social Security Act. Instead, list it here:	t received was a bene	fit			·		
	For you\$	0.0	00					
	For your spouse \$							
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Specific Do not include any benefits received under the Social Specieved as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or internationa a separate page and p	nts I or	¢.	0.00	r.		
	•			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	4,888.00	+ _			4,888.00
Part	2: Determine Whether the Means Test Applies to	o You					Total cu income	irrent monthly
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	nere=>	\$	4,888.00
	Multiply by 12 (the number of months in a year)						x 1:	
	12b. The result is your annual income for this part of the	e form				12b.	\$5	8,656.00
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go			l in the senar		13.	\$6	0,822.00
	for this form. This list may also be available at the bank		Poome	ani ino separ	aco monut	JOI 10		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	neck bo	x 1, <i>There is i</i>	no presun	nption of abus	e.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The p	resumption of	abuse is	determined by	/ Form 12	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information o	n this s	tatement and	in any att	achments is tr	ue and c	orrect.
	X /s/ Katrina L. Trice							
	Katrina L. Trice Signature of Debtor 1							
	Date February 1, 2019							
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file Forn	n 122A-2						
	•							
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 2

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Katrina L. Trice		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR D	EBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be paid	I to me, for services reno	dered or to
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received	ived	\$	655.00	
	Balance Due		\$	245.00	
2. 7	The source of the compensation paid to me was:				
	\blacksquare Debtor \square Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed of	compensation with any other person	unless they are men	abers and associates of n	ny law firm.
I	☐ I have agreed to share the above-disclosed components of the agreement, together with a list of the	pensation with a person or persons we names of the people sharing in the	ho are not members compensation is att	s or associates of my law ached.	v firm. A
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	of the bankruptcy	case, including:	
t c	a. Analysis of the debtor's financial situation, and of the debtor at the meeting of control of the debtor's financial situation, and of the debtor at the meeting of control of the debtor at the	s, statement of affairs and plan which reditors and confirmation hearing, an to reduce to market value; executions as needed; preparation	may be required; d any adjourned he emption planning	arings thereof;	ing of
6. I	By agreement with the debtor(s), the above-disclose Representation of the debtors in an any other adversary proceeding.			ces, relief from stay a	actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement cankruptcy proceeding.	of any agreement or arrangement for	payment to me for r	epresentation of the deb	tor(s) in
F	ebruary 1, 2019	/s/ Martin Baker			
D_{i}	ate	Martin Baker (002 Signature of Attorne			
		Baker, Baker & Ba			
		55 Public Square			
		Suite 1330 Cleveland, OH 44	113		
		216-771-3966 Fax	x: 216-771-4124		
		sbakerlaw@sbcgl	obal.net		
		Name of law firm			

United States Bankruptcy Court Northern District of Ohio

In re	Katrina L. Trice	Debtor(s)	Case No. Chapter	7	
	VER	IFICATION OF CREDITOR			
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.	
Date:	February 1, 2019	/s/ Katrina L. Trice Katrina L. Trice Signature of Debtor			

Acceptance Now 7767 Mentor Avenue Mentor, OH 44060

Comenity Bank c/o Portfolio Recovery 120 Corporate Blvd., #100 Norfolk, VA 23502

Ohio First Class Credit U PO Box 5877 Cleveland, OH 44101-0877

AES/PNC PO Box 61047 Harrisburg, PA 17106-1047

Comenity Bank/Victoria's Secrenc Bankruptcy Notice PO Box 182125 Columbus, OH 43218-2125

PO Box 8703 Dayton, OH 45401

ATT Uverse c/o ERC PO Box 57547 Jacksonville, FL 32241 Coment Loans Tonto Apache Reservations Payson, AZ 85541

Portfolion Recovery/CapiO c/o Viktoriya Dyrda Javitch Block 1100 Superior Ave., 19th F Cleveland, OH 44114

Capital One Auto Finance CB Disputes Team PO Box 259407 Plano, TX 75025-9407

Jared c/o Resurgent Cap Svs, LP PO Box 1269 Greenville, SC 29602

Premier Smiles Orthodont c/o Receivable Recovery 110 Veterans Memorial Blu Metairie, LA 70005

Capital One/Cabelas PO Box 3021

Kohls Department Store PO Box 3115 Salt Lake City, UT 84130-028Milwaukee, WI 53201-3115 Progressive Leasing 256 W. Data Dr. Draper, UT 84020

Charter Communications Line of Credit Now c/o Diversified Consultants c/o TransUnion PO Box 551268

P.O. Box 1000 Jacksonville, FL 32255 Crum Lynne, PA 19022 Rodier Law Firm 6100 Oak Tree Blvd., #200 Independence, OH 44131

City of Cleveland Division of Water PO Box 94540 Cleveland, OH 44101-4540

Money Key c/o Plaza Services 110 Hammond Drive Atlanta, GA 30328

Sky Cash USA 2637 E. Atlantice Blvd., # Pompano Beach, FL 33062

Cleveland Heights Utilities Deptnet Loan Services 40 Severance Circle 3015 S. Parker Rd, #400 Cleveland Hts., OH 44118 Denver, CO 80201

Spotloan PO Box 720 Belcourt, ND 58316-0720

Comenity Bank c/o Midland Funding, LLC 2365 Northside Drive, #300 San Diego, CA 92108

Nelnet Loan Services 3015 S. Parker Rd., #400 Denver, CO 80201-1649 St.Margaret and St. GregC 1499 Dean Drive South Euclid, OH 44121

Comenity Bank c/o Midland Funding, LLC 2365 Northside Drive, #300 Cleveland, OH 44101 San Diego, CA 92108

Northeast Ohio Regional DistrSymtchrony PO Box 94970

c/o Portfolio Recovery 120 Corporate Blvd., #100 Norfolk, VA 23502

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Synchrony Bank c/o Cavalry Portfolio Svcs 500 Summit Lake Dr., 4A Valhalla, NY 10595

Synchrony Bank/Ashley Attn: Bankruptcy Dept. PO Box 965064 Orlando, FL 32896-5064

Synchrony Bank/Walmrt Attn: Bankruptcy Dept. PO Box 965064 Orlando, FL 32896-5064

TD Bank USA/Target Credit NCD-0450 PO Box 1470 Minneapolis, MN 55440

Verizon Wireless c/o Jefferson Capital System 16 McLeland Road Saint Cloud, MN 56303

Webbank/Fingerhut 6250 Ridgewood Rd. Saint Cloud, MN 56303